## APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

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	e <b>k one</b> *a. ⊠ b. □	in the specification:  attached hereto. filed on as App	lication No.	and amended on(	if annlicable)
as an	I hereby state nended by any ame	that I have reviewed and uncendment referred to above.	derstand the contents of	f the above-identified specificat	ion, including the claims,
appıı	on Feder cation(s) and/or U	al Regulations, §1.56. Unde	r Title 35, U.S. Code 8	nown to me to be material to pa 119, the priority benefits of the r my legal representatives or ass	following foreign
Unite forei	a States of Americ	g application(s) for patent or ca either (a) more than one you ion(s) and/or United States p	ear prior to this applicat	this invention were filed in coution, or (b) before the filing date s):	untries foreign to the e of the above-named
appli	I hereby appoint and to transfer	int the following as my attornact all business in the Patent	neys of record with full Office:	power of substitution and revoc	cation to prosecute this
	Mar Joel S. R Don	io A. Costantino, Registrat Armstrong, Registration N Lichard E. Rice, Registratio L. Webber, Registration N ene O. Palazzo, Registratio	tion No. 33,565; Steph fo. 36,430; Christophe m No. 31,560; Mark C fo. 34,275; Ronald F. (	A. Miller, Registration No. 32 en J. Roe, Registration No. 34 r W. Brown, Registration No. 31,34 Chapuran, Registration No. 20 k. Kepner, Registration No. 32 ration No. 36,784.	5,463; 38,025; 42; 6.402:
ALL BERI	CORRESPONDI RIDGE, PLC, P.C	ENCE IN CONNECTION  D. BOX 19928, ALEXAND	WITH THIS APPLIC RIA, VIRGINIA 2232	CATION SHOULD BE SENT 10, TELEPHONE (703) 836-64	TO OLIFF & 400.
impris	nents were made we sonment, or both, u	re true and that all statements ith the knowledge that willfu	s made on information : Il false statements and t 8 of the United States (	of this Declaration, and that all and belief are believed to be tru the like so made are punishable Code and that such willful false	e; and further that these
1	Typewritten Fu of First or Sole		Steven	J.	II A D D N C T C N
,	*************		Given Name	· Middle Initial	HARRINGTON Family Name
3	**INVENTOR'S SIGNATURE:  **DATE OF SIGNATURE:		10	Sty to	· · · · · · · · · · · · · · · · · · ·
3	""DATE OF S	IGNATURE:	Month	20 Day	200/
	Residence:	Webster		New York	Year USA
	Citizenship:	City USA	S	tate or Province	Country
		Post Office Address: (Insert complete	251 Burnett Road		
		mailing address,			

Webster, New York 14580 USA

including country)

<sup>\*</sup>This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked. \*\*Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.